

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/089550	FILING DATE 18 OCT 2002				
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.
1		/					51				
2		/					52				
3		/					53				
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46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.			/				TOTAL IND.				
TOTAL DEP.			10				TOTAL DEP.				
TOTAL CLAIMS			11				TOTAL CLAIMS				